# 1200549



SEC 1972 Potential persons who are to respond to the collectic in this form are not required to respond unless the form displays a cu (6-02)valid OMB control number.

### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

PECEIVED

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per response...1

SEC USE ONLY					
Prefix	refix Seria				
DAT	E RECEI	VED			

Name of Offering ([] check if this is an amendment and name has changed, and indicat Lambda Technologies, Inc. Series F Preferred Stock Offering	e change.)					
Filing Under (Check box(es) that apply): [ ] Rule 504 [ ] Rule 505 [ X ] Rule 506	[ ] Section 4(6)	[]ULOE				
Type of Filing: [ ] New Filing [ X ] Amendment	PRO	CESSE				
A. BASIC IDENTIFICATION DATA	<b>メ</b> .	6 0 4 2003				
Enter the information requested about the issuer						
Name of Issuer ([ ] check if this is an amendment and name has changed, and indicate Lambda Technologies, Inc.	e change.)					
Address of Executive Offices (Number and Street, City, State, Zip Code) Area Code) 860 Aviation Parkway, Suite 900, Morrisville, North Carolina 27560	Telephone Numbe	er (Including				
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (Including Area Code) (if different from Executive Offices)	Telephone Num	ber				
Brief Description of Business Microwave energy technology						

CORP-8007-56-318534-v1

Type of Business Organization

[ ] business trust	[ ] limited partnership, t	•	[ ] other (please specify):
Actual or Estimated Date of I	ncorporation or Organization:	Month Year	r [X] Actual [] Estimated
Jurisdiction of Incorporation of	or Organization: (Enter two-letter CN for Canada; FN fo		

#### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seg. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

## A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply: [ ] Promoter [ X ] Beneficial Owner [X] Executive Officer [X] Director [ ]	General and/o Managing Partner
Full Name (Last name first, if individual)  Garard, Richard	11/4/10/
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Lambda Technologies, Inc., 860 Aviation Parkway, Suite 900, Morrisville, North Carolina 2	7560
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ X ] Executive Officer [ ] Director [ ]	General and/o Managing Partner
Full Name (Last name first, if individual) Fathi, Zak	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Lambda Technologies, Inc., 860 Aviation Parkway, Suite 900, Morrisville, North Carolina 2	7560
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer [X] Director [ ]	General and/or Managing Partner
Full Name (Last name first, if individual) William J. Armfield, Jr.	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Lambda Technologies, Inc., 860 Aviation Parkway, Suite 900, Morrisville, North Carolina 2	7560
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer [X] Director [ ]	General and/or Managing Partner
Full Name (Last name first, if individual)  Mumma, Mitchell	

Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer [X] Director [ ]	General and/or Managing Partner
Full Name (Last name first, if individual) Rohrer, Ronald A.	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Lambda Technologies, Inc., 860 Aviation Parkway, Suite 900, Morrisville, North Carolina 22	7560
Check Box(es) that Apply: [ ] Promoter [X] Beneficial Owner [ ] Executive Officer [X] Director [ ]	General and/or Managing Partner
Full Name (Last name first, if individual) Woody, W. Ruffin, Jr.	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Lambda Technologies, Inc., 860 Aviation Parkway, Suite 900, Morrisville, North Carolina 27	7560
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer [X] Director [ ]	General and/or Managing Partner
Full Name (Last name first, if individual)  Dunn, Robert A.	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Lambda Technologies, Inc., 860 Aviation Parkway, Suite 900, Morrisville, North Carolina 2	7560
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [X] Executive Officer [ ] Director [ ]	General and/or Managing Partner
Full Name (Last name first, if individual) Fitzpatrick, Thomas J.	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Lambda Technologies, Inc., 860 Aviation Parkway, Suite 900, Morrisville, North Carolina 2	7560
Check Box(es) that Apply: [ ] Promoter [X] Beneficial Owner [ ] Executive Officer [X] Director [ ]	General and/or Managing Partner
Full Name (Last name first, if individual)  Dean E. Painter, Jr.	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Lambda Technologies, Inc., 860 Aviation Parkway, Suite 900, Morrisville, North Carolina 2'	7560
Check Box(es) that Apply: [ ] Promoter [X] Beneficial Owner [ ] Executive Officer [ ] Director [ ]	General and/or Managing Partner

Full Name (Last name first, if individual) Affiliates of Intersouth Partners	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Lambda Technologies, Inc., 860 Aviation Parkway, Suite 900, Morrisville, North Carolina 2	7560
Check Box(es) that Apply: [ ] Promoter [X] Beneficial Owner [ ] Executive Officer [ ] Director [ ]	General and/or Managing Partner
Full Name (Last name first, if individual) Spotswood Capital, LLC	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Lambda Technologies, Inc., 860 Aviation Parkway, Suite 900, Morrisville, North Carolina 2	7560
Check Box(es) that Apply: [ ] Promoter [X] Beneficial Owner [ ] Executive Officer [ ] Director [ ]	General and/or Managing Partner
Full Name (Last name first, if individual) Tri-State Investment Group II, LLC	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Lambda Technologies, Inc., 860 Aviation Parkway, Suite 900, Morrisville, North Carolina 2	7560
Check Box(es) that Apply: [ ] Promoter [X] Beneficial Owner [ ] Executive Officer [ ] Director [ ]	General and/or Managing Partner
Full Name (Last name first, if individual) Nordson Corporation	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Lambda Technologies, Inc., 860 Aviation Parkway, Suite 900, Morrisville, North Carolina 2	7560
Check Box(es) that Apply: [ ] Promoter [X] Beneficial Owner [ ] Executive Officer [ ] Director [ ]	General and/or Managing Partner
Full Name (Last name first, if individual) Woody Investments, LLC	
Business or Residence Address (Number and Street, City, State, Zip Code)	7540

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

				В.	INFORM	ATION A	BOUT OF	FERING					
1. Has	the issue	er sold, o	r does th	e issuer i	ntend to	sell, to no	n-accredi	ited invest	ors in this	offering	?	Yes	No [ X ]
			Ar	nswer als	o in Appe	endix, Col	umn 2, if	filing unde	er ULOE.			• •	
2. Wha	it is the n	ninimum	investme	nt that w	ill be acce	epted fror	n any indi	vidual?				\$_N/A	١
3. Doe	s the offe	ering per	mit joint o	wnership	of a sing	le unit?						Yes	No 1
indirector of securegiste five (5)	tly, any ourities in the red with persons	commission the offerithe SEC to be lis	on or sim ng. If a pe and/or w	ilar remu erson to l ith a state ssociated	neration for the contract of t	for solicita s an asso s, list the	ation of pu ociated pe name of t	vill be paid urchasers erson or ag the broker or dealer, y	in connect gent of a b or dealer	tion with proker or t. If more	sales dealer than		•
Full Na	me (Las	t name fi	rst, if indi	vidual)									
Busine	ss or Re	sidence i	Address	(Number	and Stree	et, City, S	tate, Zip (	Code)					
Name	of Assoc	iated Bro	ker or De	ealer									
States	in Which	Person	Listed Ha	as Solicite	ed or Inte	nds to So	licit Purch	nasers					
(Chec	k "All S	tates" o	r check i	ndividu	al States	)				[	] All S	tates	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[1]	D]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[N	MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[F	PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[AV]	[WA]	[WV]	[WI]	[WY]	[F	PR]
Full Na	me (Las	t name fi	rst, if indi	vidual)									
Busine	ss or Re	sidence	Address	(Number	and Stree	et, City, S	state, Zip	Code)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Name	of Assoc	iated Bro	ker or De	ealer									
					ed or Inte		olicit Purch	nasers		Γ	] All Sta	tes	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	 [CT]	[DE]	[DC]	[FL]	[GA]	[HI]		D]
[IL]	[IN]	[AZ]	[KS]	[KY]	[CO] [LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	_	ИО]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	_	PA]
[RI]	[SC]	[SD]	[TN]	[XT]	[TU]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	-	PR]
Full Na	me (Las	t name fi	rst, if indi	vidual)					····				
Busine	ss or Re	sidence	Address	(Number	and Stree	et, City, S	itate, Zip	Code)					
Name	of Assoc	iated Bro	ker or De	ealer									***************************************

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States)						[	] All Sta	ites				
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[iA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[W1]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

T - 10	Aggregate	Amount Already
Type of Security	Offering Price	Sold
Debt	\$ 61,315.00	
Equity	\$ <u>2,000,000.00</u>	\$_2,000,000.00
[ ] Common [ X ] Preferred		
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$	\$
Other (Specify).	\$	\$
Total	\$ <u>2,061,315.00</u>	\$ <u>2,061,315.00</u>
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Aggregate
	Number	Dollar Amount
	Investors	of Purchases
Accredited Investors	<u>26</u>	\$ <u>2,061,315.00</u>
Non-accredited Investors		\$
Total (for filings under Rule 504 only)		_ \$
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under <u>Rule 504</u> or <u>505</u> , enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
Type of offering	Type of Security	Dollar Amount Sold
Rule 505		. \$
Regulation A		. \$
Rule 504		_ \$
Total		_ \$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees	[1	\$
Printing and Engraving Costs	[]	\$
Legal Fees	[ <b>X</b> .	\$ 15,000.00
Accounting Fees	I _ '	\$
Engineering Fees	::	\$
	[]	
Sales Commissions (specify finders' fees separately)	[]	\$

Other Expenses (identify)		[] \$	
Total		[X]\$	2,046,315.00
b. Enter the difference between the aggregate offeri Question 1 and total expenses furnished in responsithe "adjusted gross proceeds to the issuer."	e to Part C - Question 4.a. This differer	nce is	2,046,315.00
5. Indicate below the amount of the adjusted gross proposed to be used for each of the purposes show known, furnish an estimate and check the box to the payments listed must equal the adjusted gross procto Part C - Question 4.b above.	n. If the amount for any purpose is not eleft of the estimate. The total of the		
		Payments to Officers.	•
			Payments To Others
Salaries and fees		\$	. \$
Purchase of real estate		\$	\$
Purchase, rental or leasing and installation of n and equipment	machinery	\$	\$
Construction or leasing of plant buildings and fo		\$	\$
Acquisition of other businesses (including the visceurities involved in this offering that may be	value of	-	
exchange for the assets or securities of another pursuant to a merger)	er issuer	\$	. \$
Repayment of indebtedness		\$	\$
Working capital	•••••	\$	\$2,046,315.00
Other (specify):		\$	\$
•		\$	<b>\$</b>
Column Totals		\$	\$
Total Payments Listed (column totals added)		Ψ	\$2,046,315.00
	DERAL SIGNATURE		
The issuer has duly caused this notice to be signed under Rule 505, the following signature constitutes a Exchange Commission, upon written request of its sinvestor pursuant to paragraph (b)(2) of Rule 502.	an undertaking by the issuer to furnish	to the U.S. Se	curities and
Issuer (Print or Type)	Signature	Dat	-
Lambda Technologies, Inc.	The mind	] 7	-30 - 03
Name of Signer (Print or Type)	Title of Signer (Print or Type)		
Thomas J. Fitzpatrick	Chief Financial Officer		
	ATTENTION		
Intentional misstatements or omissions of fact	t constitute federal criminal violation	s. (See 18 U.	S.C. 1001.)